

FEC  
FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

2012 OCT 17 AM 11:34

Office Use Only  
FEC MAIL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

CESAR HENAO FOR CONGRESS COMMITTEE

ADDRESS (number and street)

5023 SOLAR POINT DRIVE



Check if different than previously reported. (ACC)

GREENACRES

FL

33463

2. FEC IDENTIFICATION NUMBER ▼

C

C00521534

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

FL

21

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M

D D

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M

D D

Y Y Y Y

in the State of

5. Covering Period

M M  
07D D  
01Y Y Y Y  
2012

through

M M  
09D D  
30Y Y Y Y  
2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mrs. Deana Cruz

Signature of Treasurer

Mrs. Deana Cruz

Date

M M  
10D D  
12Y Y Y Y  
2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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